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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	705699US1
	First Inventor or Application Identifier	Thomas S Moore, et al.
	Title	Reinforcement Array For High Modulus Reinforcement Of Composites
	Express Mail Label No.	EL536119164US

<b>APPLICATION ELEMENTS</b> <small>See MPEP Chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
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<p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> <li>-Descriptive title of the Invention</li> <li>-Cross References to Related Applications</li> <li>-Statement Regarding Fed Sponsored R&amp;D</li> <li>-Reference to Microfiche Appendix</li> <li>-Background of the Invention</li> <li>-Brief Summary of the Invention</li> <li>-Brief Description of the Drawings (if filed)</li> <li>-Detailed Description</li> <li>-Claim(s)</li> <li>-Abstract of the Disclosure</li> </ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2]       <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed)           <ul style="list-style-type: none"> <li>i. <u>DELETION OF INVENTOR(S)</u>  Signed statement attached deleting inventor(s) Named in the prior application, see 37 C.F.R. § 1.63(d)(2) and 1.33 (b).</li> </ul> </li> </ul> </p>	<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)       <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul> </p>
<b>ACCOMPANYING APPLICATION PARTS</b>	
<p>7. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>8. <input type="checkbox"/> 37 C.F.R. § 3.37(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard MPEP 503)</p> <p>13. <input type="checkbox"/> Statement (s) <input type="checkbox"/> Statement filed in prior (PTO/SB/09-12) application, Status still proper and desired</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Other:</p>	

**\*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY  
SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS  
REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR  
APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a **CONTINUING APPLICATION**, Check appropriate box, and supply the requisite information below and in a preliminary amendment:  
 Continuation  Divisional  Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

FOR CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **24938** or  Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name	Lisa K. Mack DaimlerChrysler Intellectual Capital Corporation				
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**24938**  
PATENT TRADEMARK OFFICE

Name (Print or Type)	Lisa K. Mack	Registration No.	42,825
Signature	Lisa K. Mack	Date	Oct. 11, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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# FEE TRANSMITTAL For FY 2001

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

**TOTAL AMOUNT OF PAYMENT** (\$ 740

## Complete if Known

Application Number	unknown
Filing Date	November
First Named Inventor	Thomas S Moore
Examiner Name	unknown
Group / Art Unit	unknown
Attorney Docket No.	705699US1

## METHOD OF PAYMENT (check one)

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number

03-1800

Deposit Account Name

DaimlerChrysler Intellectual Capital Corporation

Charge Any Additional Fee Required Under  
37 CFR 1.16 and 1.17

## 2. Payment Enclosed:

Check  Money Order  Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	
101	710	201	Utility filing fee 355	740
106	320	206	Design filing fee 160	
107	490	207	Plant filing fee 245	
108	710	208	Reissue filing fee 355	
114	150	214	Provisional filing fee 75	
<b>SUBTOTAL (1)</b>			<b>740</b>	

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claim	Fee from below	Fee Paid
18	-20** = 0	X 0	= 0
Independent Claims 2	- 3** = 0	X 0	= 0

Multiple Dependent  
\*\* or number previously paid, if greater; For  
Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee Description
103	18	203
102	84	202
104	280	204
109	84	209
110	18	210
<b>SUBTOTAL (2)</b> (\$ 0		

## FEE CALCULATION (continued)

3. ADDITIONAL FEES	Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
105	130	205	Surcharge-late filing fee or oath 65	
127	50	227	Surcharge-late provisional filing fee or cover sheet 25	
139	130	139	Non-English specification 130	
147	2,520	147	For filing a request for examination 2,520	
112	920*	112	Requesting publication of SIR prior to Examiner action 920*	
113	1,840*	113	Requesting publication of SIR after Examiner action 1,840*	
115	110	215	Extension for reply within first month 55	
116	390	216	Extension for reply within second month 195	
117	890	217	Extension for reply within third month 445	
118	1,390	218	Extension for reply within fourth month 695	
128	1,890	228	Extension for reply within fifth month 945	
119	310	219	Notice of Appeal 155	
120	310	220	Filing a brief in support of an appeal 155	
121	270	221	Request for oral hearing 135	
138	1,510	138	Petition to institute a public use proceeding 1,510	
140	110	240	Petition to revive – unavoidable 55	
141	1,240	241	Petition to revive – unintentional 620	
142	1,240	242	Utility issue fee (or reissue) 620	
143	440	243	Design issue fee 220	
144	600	244	Plant issue fee 300	
122	130	122	Petitions to the Commissioner 130	
123	50	123	Petitions related to provisional applications 50	
126	180	126	Submission of Information Discl. Stmt. 180	
581	40	581	Recording of each patent assignment per property (times number of properties) 40	
146	710	246	Filing a submission after final rejection (37 CFR 1.129(a)) 355	
149	710	249	For each additional invention to be examined (34 CFR 1.129(b)) 355	
Other fee (specify) _____				
Other fee (specify) _____				
* Reduced by Basic Filing Fee Paid			<b>SUBTOTAL (3)</b>	(\$ 0

## SUBMITTED BY

Typed or Printed Name

Lisa K. Mack

Complete (if applicable)

Reg. Number 42,825

Signature

*Lisa K. Mack*

Date

*Oct. 11, 2001*

Deposit Account User ID